REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

Application Number	10/631,107
Confirmation Number	7745
Filing Date	July 31, 2003
First Named Inventor	Michael John HODGSON
Art Unit	3696
Examiner Name	Samica L. NORMAN
Attorney Docket Number	CA1169

To: Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

I hereby apply to withdraw as attorney or agent for the above identified patent application.

The reasons for this request are:

The attorney prosecuting this application has changed firms.

CORRESPONDENCE ADDRESS

- 1.

 The correspondence address is NOT affected by this withdrawal.
- 2. Change the correspondence address and direct all future correspondence to:

Pavel I. Pogodin, Esq. Haynes and Boone 2033 Gateway Place, Suite 400 San Jose, CA 95110

☐ This request is made on behalf of myself and

- □ all the attorneys/agents of record,
 - ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
 - ☑ the attorney/agents associated with Customer Number

WASHINGTON OFFICE

23373

CUSTOMER NUMBER

This request is enclosed in triplicate (including any attachments).

Name Brian W. Hannon

Signature /Brian W. Hannon/

Reg. No. 32,778

Date November 18, 2009

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.